

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention the specification of which (check only one item below):

☐ entitled:

☐ is attached hereto.

☐ was filed as United States application

Serial No _____

on _____

and was amended

on _____

☒ was filed as PCT international application

Number PCT/IB2005/050940

on March 18, 2005

and was amended under PCT Article 19

on _____ (if applicable).

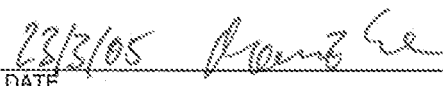
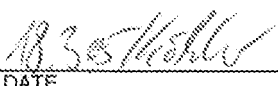
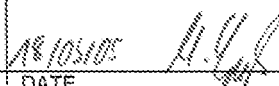
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

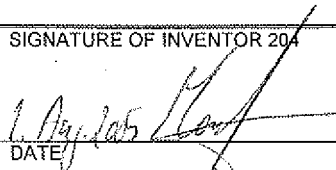
PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119
Europe	04 101 250.1	25 March 2004	YES

Combined Declaration For Patent Application and Power of Attorney (Continued) <small>(includes Reference to PCT International Applications)</small>				Attorneys Docket Number PHDE040084 US	
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)					
Jack E. Haken, Reg. No. 26,902 Michael E. Marion, Reg. No. 32,266 Edward M. Blocker, Reg. No. 30,245				Direct Telephone Calls to: (name and telephone number) (914)332-0222	
201	FULL NAME OF INVENTOR	FAMILY NAME MANZKE	FIRST GIVEN NAME Robert	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY Husberg	STATE OR FOREIGN COUNTRY Germany	COUNTRY OF CITIZENSHIP Germany	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Hasenredder 31	CITY 24620 Husberg	STATE & ZIP CODE/COUNTRY Germany	
202	FULL NAME OF INVENTOR	FAMILY NAME KOEHLER	FIRST GIVEN NAME Thomas	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY Norderstedt	STATE OR FOREIGN COUNTRY Germany	COUNTRY OF CITIZENSHIP Germany	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Stoerkamp 23	CITY 22851 Norderstedt	STATE & ZIP CODE/COUNTRY Germany	
203	FULL NAME OF INVENTOR	FAMILY NAME GRASS	FIRST GIVEN NAME Michael	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY Buchholz in der Nordheide	STATE OR FOREIGN COUNTRY Germany	COUNTRY OF CITIZENSHIP Germany	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Theodor-Storm-Weg 35C	CITY 21244 Buchholz in der Nordheide	STATE & ZIP CODE/COUNTRY Germany	
204	FULL NAME OF INVENTOR	FAMILY NAME MOVASSAGHI	FIRST GIVEN NAME Babak	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY Hamburg	STATE OR FOREIGN COUNTRY Germany	COUNTRY OF CITIZENSHIP Germany	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Schanzenstr. 101	CITY 20357 Hamburg	STATE & ZIP CODE/COUNTRY Germany	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.					
SIGNATURE OF INVENTOR 201		SIGNATURE OF INVENTOR 202		SIGNATURE OF INVENTOR 203	
 DATE		 DATE		 DATE	
SIGNATURE OF INVENTOR 204					
DATE					

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

(July 1994)

Combined Declaration For Patent Application and Power of Attorney (Continued) (includes Reference to PCT International Applications)				Attorneys Docket Number PHDE040084 US	
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)					
Jack E. Haken, Reg. No. 26,902 Michael E. Marion, Reg. No. 32,266 Edward M. Blocker, Reg. No. 30,245				Direct Telephone Calls to: (name and telephone number) (914)332-0222	
201	FULL NAME OF INVENTOR	FAMILY NAME MANZKE	FIRST GIVEN NAME Robert	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY Husberg	STATE OR FOREIGN COUNTRY Germany	COUNTRY OF CITIZENSHIP Germany	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Hasenredder 31	CITY 24620 Husberg	STATE & ZIP CODE/COUNTRY Germany	
202	FULL NAME OF INVENTOR	FAMILY NAME KOEHLER	FIRST GIVEN NAME Thomas	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY Norderstedt	STATE OR FOREIGN COUNTRY Germany	COUNTRY OF CITIZENSHIP Germany	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Stoerkamp 23	CITY 22851 Norderstedt	STATE & ZIP CODE/COUNTRY Germany	
203	FULL NAME OF INVENTOR	FAMILY NAME GRASS	FIRST GIVEN NAME Michael	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY Buchholz in der Nordheide	STATE OR FOREIGN COUNTRY Germany	COUNTRY OF CITIZENSHIP Germany	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Theodor-Storm-Weg 35C	CITY 21244 Buchholz in der Nordheide	STATE & ZIP CODE/COUNTRY Germany	
204	FULL NAME OF INVENTOR	FAMILY NAME MOVASSAGHI	FIRST GIVEN NAME Babak	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY Hamburg	STATE OR FOREIGN COUNTRY Germany	COUNTRY OF CITIZENSHIP Germany	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Schanzenstr. 101	CITY 20357 Hamburg	STATE & ZIP CODE/COUNTRY Germany	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.					
SIGNATURE OF INVENTOR 201		SIGNATURE OF INVENTOR 202		SIGNATURE OF INVENTOR 203	
DATE		DATE		DATE	
SIGNATURE OF INVENTOR 204 					
DATE					

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

(July 1994)